



# City of Flagstaff Parks & Recreation

## Activity Registration Form

211 West Aspen Ave.  
Flagstaff, Arizona 86001

Phone: (928) 779-7690

Fax: (928) 213-4830

Household No.: \_\_\_\_\_  
(if previously established)

Resident\*      Non-Resident  
\*Residents are on City water services

**Household Information** (please print clearly):

Head of Household: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Secondary Head of Household (if applicable): \_\_\_\_\_

Address (if different from head of household): \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_

**Emergency Contact:**

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Participant's Name	Birth date	Grade	Activity/Program Name	Level	Session Dates	Time	Price
							\$
							\$
							\$
							\$
							\$
							\$
							\$
							\$

The scholarship program is made possible through donations from businesses, individuals, and fund-raising events. If you would like to make a donation, please add the dollar amount to your registration form or mail a check to Flagstaff Parks and Recreation Scholarship Donations, 211 W. Aspen Ave., Flagstaff, AZ 86001. Please make check payable to the City of Flagstaff.

**Recreation Scholarship Donation** (any amount is appreciated): \$

Total \$

*I am aware of the nature of this activity and I assume responsibility for myself, if I am a participant, or as parent or guardian of the minor child(ren) indicated above as participant(s). I will not hold the City of Flagstaff, the Parks and Recreation Division, or its employees responsible in case of accident or injury resulting from my participation or the participation of the minor child(ren) indicated above. I hereby release from responsibility anyone transporting me or the child(ren) indicated above to or from any activity or program listed on this form. I hereby approve of the City of Flagstaff Parks and Recreation Division to use my likeness or my minor child(ren)'s likeness in future publications and/or publicity.*

\_\_\_\_\_  
**Signature of Participant** (Parent or Guardian signs if participant is under 18)      **Date** Revised 3/21/05